

PTO/SB/22 (12-07) roved for use through 12/31/2007. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR	Docket Number (Optional)									
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H	4578-0116PUS1									
Application Number 10/568,779-Conf. #5253	Filed	iled February 21, 2006								
For ESTERIFICATION PRODUCT AND COSMETICS										
Art Unit 1621	Examiner	ner D. D. Carr								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.										
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):										
	<u>ee</u> 6120	Small Entity F \$60	- ee \$							
	460	\$230	\$	460.00						
	050	\$525	\$							
Four months (37 CFR 1.17(a)(4)) \$1	640	\$820	\$							
Five months (37 CFR 1.17(a)(5)) \$2	230	\$1115	\$							
Applicant claims small entity status. See 37 CFR 1	27.									
A check in the amount of the fee is enclosed.										
Payment by credit card. Form PTO-2038 is attached	d.									
The Director has already been authorized to charge fees in this application to a Deposit Account.										
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
I am the applicant/inventor.										
assignee of record of the entire interes Statement under 37 CFR 3.73(b)			/96).							
attorney or agent of record. Registration	on Number	28,380								
attorney or agent under 37 CFR 1.34.										
Registration number if acting under 37										
Signature 1 32, 734		December 21, 2007 Date								
James M. Slattery		(7(03) 205-8015							
Typed or printed name	Telephone Number									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
Total of 1 forms are submitted.										

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PTO/SB/17 (10-07)

DEC 2 1 2007						and Traden	oved for use through nark Office; U.S. DE	PARTMENT C	OF COMMERCE
	Under the Paperw	Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known							
Tree at	Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Appli	Application Number 10/568,779-6				
A PADEMAN	FFF.	TRANSI	<u></u>		Date		February 21, 2		
		_			Named Inv		Jun OKI		
	For FY 2008			Exam	Examiner Name D. D. C				
	Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1621				
	TOTAL AMOUNT OF PAYMENT (\$) 460.00			Attorn	Attorney Docket No. 4578-0116F			S1	
	METHOD OF PA	YMENT (check a	all that apply)						
		Credit Card	Money Order	None [`	please identi Account Nam	fy): e: Birch, Stewar	t, Kolasch &	Birch, LLP
	For the above	ve-identified depos	sit account, the Direc	tor is hereby	y authorize	ed to: (che	ck all that apply)		
	l —	e fee(s) indicated		ſ		-	dicated below, e		ne filing fee
		e any additional fe under 37 CFR 1.1	ee(s) or underpayme	nts of	x Credit	any overp	ayments		
	FEE CALCULAT	ION						· · · · · · · · · · · · · · · · · · ·	
	1. BASIC FILING, S	•							
		FIL	ING FEES Small Entity	SEARCH	FEES all Entity	EXAMI	NATION FEES Small Entity		
	Application Type	<u>Fee (\$)</u>			Fee (\$)	Fee (\$)	Fee (\$)	Fees F	Paid (\$)
	Utility	310	155	510	255	210	105		
	Design	210		100	50	130	65		
	Plant	210		310	155	160	80		
	Reissue	310		510	255	620	310		
	Provisional	210	105	0	0	0	0		
	2. EXCESS CLAIM	FEES							Small Entity Fee (\$)
	Fee Description Each claim over 20		•					<u>Fee (\$)</u> 50	25
	Each independent cl	•	ding Reissues)					210	105
	Multiple dependent							370	185
	Total Claims	Extra Claims		Fee Paid (\$)	<u> </u>		ultiple Depende		
	9 - = HP = highest number o	f total claims paid for.				Fe	ee (\$)	Fee Paid (\$	1
	Indep. Claims	Extra Claims x	Fee (\$) =	Fee Paid (\$)		_			
			oaid for, if greater than 3.						
	listings under 3	and drawings exc 7 CFR 1.52(e)), the	ceed 100 sheets of p ne application size for U.S.C. 41(a)(1)(G)	ee due is \$20	50 (\$130 f)
	<u>Total Sheets</u> - 1	Extra Sheets 00 =	<u>Number of e</u> /50 =	ach additiona (round				<u>Fee F</u> =	Paid (\$)
	4. OTHER FEE(S)					ŕ		Fees	Paid (\$)
			fee (no small entity 1252 Extension for	-	within se	econd mo	onth	46	0.00
<u> </u>	SUBMITTED BY		1. 1 No					_	
<u> </u>	Signature Signature	NUL	M rough	Registra		28,380	Telephone	(703) 205	
ļ		mes M. Slattery	Many Dols	(Attorney	//Agent)			ecember:	
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